

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | RR | 78529 | 2/20/02 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here